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NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 199/44, 774

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	<u> </u>	Fee	Fec =	Total
_	Sm./Lg.				Sm. Entity	Lg. Entiry	
r Basic Filing Fee	201/101						760
Total Claims >20	203/103	18 -20	-	Х			
Independent Claums >3	202/102	3 -3	<u> </u>	Х			
Mult. Dep Claim Present	204/104				, 	B	
Surcharge	205/105	•					130
English Translation	139						
TOTAL FEE CALCUL	ATION						890
Fees due upon filing t	he application	i:					
Total Filing Fees Due	= s <u>{</u>	390					
Less Filing Fees Subn	nined - \$						
BALANCE DUE	= \$	90					
hom Ville	- 12fo	6/25					
Office of Initial Patent	Examination						

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										Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998 9/2025 774															
CLAIMS AS FILED - PART I (Column 1) (Column 2))	SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY		
FOR NUMBER FILED				ĺ	NUMBER EXTRA			RAT	Ξ	FEE	1	RATE	FEE		
BASIC FEE										380.00	OR		760.00		
TOTAL CLAIMS			18	minus 2	20= *				ົX\$ 9	= [OR	X\$18=		
INDEPENDENT CLAIMS			3	minus	3 =	*		ľ	X39=	=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT									+130	= .		OR	+260=	<u>.</u>	
* If the difference in column 1 is less than zero, enter "0" in column 2								L	TOTA	Ľ		OR	TOTAL	17/60	
CLAIMS AS AMENDED - PART II									4	OTHER					
		(Colum	nn 1)		(C	olumn 2)	(Column 3)		SMAL	LL E	ENTITY	OR	SMALL		
ENT A		CLAIN REMAIN AFTE AMENDA	NING R		PR	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	:	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*		Minus	**		=		X\$ 9=	-		ОR	X\$18=	•	
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	FIRST PRESE	NTATION	OF MU	JLTIPLE DEF	PEND	ENT CLAIM		ľ	+130=	_		OR	+260=		
			,					L	TOT			l,,, '	TOTAL		
		(Colum	n 1)		(C	olumn 2)	(Column 3)	·A	DDIT. FI	EE [ADDIT. FEE		
IDMENT B		CLAIN REMAIN AFTE AMENDN	MS NING ER		H PR	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	:	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
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AMEND	Independent	*		Minus	***		=	ľ	X39=			OR	X78=		
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								L	TOT				TOTAL		
(Column 1) (Column 2) (Column 3)								A	DDIT. FE	EEL	-		ADDIT. FEE		
	(32.AN): 10°	CLAIN	/IS		ŀ	IIGHEST		Г			ADDI-	I 1		ADDI-	
AMENDMENT C		REMAIN AFTE AMENDN	R		PR	NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE		TIONAL		RATE	TIONAL	
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	f the intry in colu	mn 1 ie lee-	than +	a antru in col···	mr o	writa "A" in co	lumn 3	L	+130=			OR	+260=		
**	f th "Highest Nu	mber Previo	ously Pa	id For" IN THIS	S SPA	CE is less tha	ın 20, enter "20."	Αľ	TOTA DDIT. FE			OR	TOTAL ADDIT. FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." Th "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.															